

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

08/973293

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	198	minus 20 = * 178
INDEPENDENT CLAIMS	13	minus 3 = * 10
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY
TYPE

RATE	FEES
	395.00
x\$11=	
x41=	
+135=	
TOTAL	

OTHER THAN
SMALL ENTITY

RATE	FEES
	790.00
x\$22=	3916
x82=	820
+270=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDITIONAL FEE	

OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDITIONAL FEE	

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

ADDITIONAL
FEE

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDITIONAL FEE	

ADDITIONAL
FEE

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDITIONAL FEE	

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

ADDITIONAL
FEE

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDITIONAL FEE	

ADDITIONAL
FEE

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SERIAL NUMBER 08/973293

TO: OFFICE OF FINANCE
FROM: CRYSTAL PLAZA 2, LOBBY

PLEASE PROCESS THE FOLLOWING COLLECTIONS:

FEES CODE	AMOUNT	FEES CODE	AMOUNT
BASIC FEE		CLAIMS/MULTIPLE DEPENDENT	
<u>960</u>	_____	<u>964</u>	<u>820</u>
<u>961</u>	_____	<u>965</u>	_____
<u>970</u>	_____	<u>966</u>	<u>3916</u>
<u>971</u>	_____	<u>967</u>	_____
<u>958</u>	<u>790</u>	<u>968</u>	_____
<u>959</u>	_____	<u>969</u>	_____
<u>956</u>	_____	LATE FEES/SURCHARGE	
<u>957</u>	_____	<u>154</u>	_____
<u>962</u>	_____	<u>254</u>	_____
<u>963</u>	_____	<u>156</u>	_____
OTHER:	_____	<u>581</u>	<u>80</u>
<u>581</u>	_____		
_____	_____		
_____	_____		

THE ORIGINAL METHOD OF PAYMENT

BY A CHECK check

BY A CHARGE TO DEPOSIT ACCOUNT NO. _____

DO/EO FEE